

Water Resources Program Application for a Water Right Permit

Follow the attached instructions. Attach additional sheets as necessary.

For Ecology Use (Date Stamp)

☐ GROUND WATER ☐ SURFACE WATER MAY 07 2012 □ PERMANENT □ SHORT TERM □ TEMPORARY DROUGHT *A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION. Section 1. APPLICANT Applicant/Business Name: Lucky Farms (Att. Joanna Tran) Phone No: Other No: 503-545-1939 Address: 6332 NE 34th City: Portland State: OR Zip: 97211 Email Address (optional): Joannat27@yahoo.com Contact Name (if different from above): Jill Van Hulle, Pacific Phone No: Other No: Groundwater Group 360-413-1510 Relationship to Applicant: Consultant Address: 312 4th Avenue East City: Olympia Zip: 98501 State: WA Email Address (optional): Jill@pgwg.com Legal Land Owner or Part Owner Name of the Proposed Place of Use: Phone No: Other No: Lucky Farms Inc Address: same State: City: Zip: Email Address (optional): Signatures are required. See page 7. For 62-30596 APPLICATION NO: Ecology SEPA: Exempt/Not Exempt Use ECY Coding: 001-001-WR1-0285-000011 Fee Paid: Check No: Priority Date 5-7-12 By 85 WRIA: 27-C/91K By Date Returned

If no, do you have legal authority	e proposed point of d to make this applicat			The state of the s
Briefly describe the purpose of yo	ur proposed project:			
Use groundwater for industrial be	an sprout facility, wa	ater is used f	for germination ar	nd washing and discharged to
Gee Creek				
Anticipated length of time to comp			eneficial use and I	ist quantity required for each.
Purpose(s) of Use	Rate (check one box only) Cubic Feet per Second (CFS) Gallons per Minute (GPM)		Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
Industrial	40	-	Approx 40	Continuously
TOTAL	40		A	
TOTAL:	40		Approx 40	
Is this a request for a short term pr Is this request for a temporary peri If yes to either question above, ind	mit? TYES N	NO		
FROM:/TO:	IVERSION OR			
FROM:/TO: _ Section 3. POINT OF D	IVERSION OR	WITHE		Source
Section 3. POINT OF D (Complete A or B, and C below	IVERSION OR	B.) If	ORAWAL Ground Water	Source
Section 3. POINT OF D (Complete A or B, and C below A.) If Surface Water Source Spring Creek River	IVERSION OR () Lake	B.) If	ORAWAL Ground Water ell(s)	
Section 3. POINT OF D (Complete A or B, and C below A.) If Surface Water Source Spring Creek River Other: Source Name:	IVERSION OR	B.) If Well d Number	Ground Water ell(s) Other: liameter & depth:_ er of proposed po	Proposed 150 – 200 feet ints of withdrawal:
Section 3. POINT OF D (Complete A or B, and C below A.) If Surface Water Source Spring Creek River Other:	IVERSION OR	B.) If Well d Number	Ground Water ell(s) Other: liameter & depth:_ er of proposed po	Proposed 150 – 200 feet
Section 3. POINT OF D (Complete A or B, and C below A.) If Surface Water Source Spring Creek River Other: Source Name:	IVERSION OR Lake	B.) If Well d Number Do you	Ground Water ell(s) Other: liameter & depth:_ er of proposed pot u have an existing	Proposed 150 – 200 feet ints of withdrawal:

_	Parcel No. 215338000	1/2 W			Township 4	Range 1E	County Clark
	Lot(s)		Bloc			ıbdivision	Clark
	Lot(s)		Dioc	.K(3)	51	10011131011	
If know	n, enter the	distances	in feet fro	om the poin	t of diversion of	or withdrawal	to the nearest section corner:
	Feet (I	North/ S	outh) and	lfe	et (East/	West)	
from the	e (\square NW [SW N	E SE		corner of Section	on	
F	Parcel No.	1/2	1/4	Section	Township	Range	County
	Lot(s)		Bloc	k(s)	St	ibdivision	
If know	n enter the	distances	in feet fro	om the poin	t of diversion of	or withdrawal	to the nearest section corner:
				1 -			nearest section conten.
					☐ East/☐ Wes		
from the	e (\square NW [_SW _N	E SE [) co	rner of Section		
OTE: If	more than t	wo points of	diversion/	withdrawal	attach additiona	l information o	n a separate sheet of paper.
Section	n 1 DI	ACE OF	TICE				
				. C.41	4 (1 41	211 2 2 4 1 0
							vill be used) taken from a real in the space below.
See Attac		perty deed	or title	insul uncc	policy, or cop.	y it carefully	in the space below.
300 1111111		_					
				-			
1/4	1/4	Section	Twp.	Range		County	Parcel No.
W ½	SW 1/4	27	4		Clark		215338000
			. 1 .1				
o you o	wn all the	lands on wh	uch the p	roposed pla	ace of use is lo	cated? 🛛 YE	S NO.
no, do	you have le	egal authori	ty to mak	ke this appli	ication for use		S NO. nnd? YES NO
no, do	you have le	egal authori	ty to mak		ication for use		
no, do	you have le	egal authori	ty to mak	ke this appli	ication for use		
no, do	you have le	egal authori	ty to mak	ke this appli	ication for use		
no, do grovide o	you have le	egal authori	ty to mak	ke this applione number	ication for use	of another's la	and? YES NO
no, do rovide o	you have le owner name	egal authori e(s), address	ty to makes, and phoses or claim	se this applione number	d with this pro	of another's la	
no, do rovide o	you have le owner name	egal authori e(s), address	ty to makes, and phoses or claim	ke this applione number	d with this pro	of another's la	and? YES NO
no, do rovide o	you have le owner name	egal authori e(s), address	ty to makes, and phoses or claim	se this applione number	d with this pro	of another's la	and? YES NO
no, do rovide o	you have le owner name	egal authori e(s), address	ty to makes, and phoses or claim	se this applione number	d with this pro	of another's la	and? YES NO
re there	you have le owner name any other	egal authori e(s), address water rights vater right a	ty to mak s, and pho s or claim	se this applione number	d with this pro	of another's la	and? ☐ YES ☐ NO system? ☐ YES ☒ NO
re there yes, pro	any other	egal authorie(s), address water rights vater right a	ty to makes, and phoses or claim	ing the po	d with this pro	of another's la	and? YES NO

IPTION		
and size of devices used to divert or withdraw water from p capable of producing approximately 40 gpm, water will be		
PLY SYSTEM INFORMATION		
B.) Municipal Water Systems only (defined under RCW 90.03.015)		
Present population to be served water:		
Estimate future population to be served:(20 year projection)		
Washington State Department of Health, Drinking Water Water System Number: system? ☐ YES ☒ NO		
e system:		

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES **Irrigation** Total number of acres requested to be irrigated under this application = N/A ACRES *NOTE:* Outline the area to be irrigated on your attached map. Stockwater List number and kind of stock: N/A Is the proposed project for a dairy farm? YES NO **Other Proposed Farm Uses** Describe all proposed uses: N/A Family Farm Water Act (RCW 90.66): Calculate the acreage in which you have a controlling interest, including only: Acreage irrigated under water rights acquired after December 8, 1977, Acreage proposed to be irrigated under this application, and Acreage proposed to be irrigated under other pending application(s). Is the combined acreage under existing rights greater than 6000 acres? YES NO Do you have a controlling interest in a Family Farm Development Permit? YES NO If yes, enter Permit No: Section 8. OTHER WATER USES **Hydropower** Indicate total feet of head _____ and proposed capacity in kilowatts:____ Describe works: N/A

Indicate all uses to which power is to be applied:

FERC License No:

Describe use, method of supplying and utilizing water:
Water will be piped from well to bean sprout facility
Other Use
Section 9. WATER STORAGE
Will you be using a dam, dike, or other structure to retain or store water? ☐ YES ☒ NO
Are you proposing to store more than 10 acre-feet of water? YES NO
Will the water depth be 10 feet or more? YES NO
If you answered yes to any of the above questions, please describe:
if you answered yes to any of the above questions, please describe.
NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.
Section 10. DRIVING DIRECTIONS
Provide detailed driving directions to the project site:
Site Address:
900 NW Carty Road, Ridgefield

Mining/Industrial Use

Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Print Name (Applicant or authorized representation)	ative)	Signature		5/5/12 Date
Print Name (Legal Owner or Part Owner Place	of Use)	Signature		Date
Print Name (Legal Owner or Part Owner Place	of Use)	Signature Please check the region in v	which the project i	Date
*Submit your application to: DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611	15 W Y Yakima	Regional Office (akima Avenue, Suite 200 a, WA 98902 575-2490	Eastern Regi	onal Office nroe A 99205-1295
OLYMPIA, WA 98504-7611	3190 – Bellevi	vest Regional Office 160 th Avenue SE ue, WA 98008-5452 49-7000	Southwest Report PO Box 4777 Olympia, WA (360) 407-630	75 A 98504-7775

If you need this document in an alternate format, please call the Water Resources Program at 360-407-6872. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.

If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.

